IDAHO MILLENNIUM FUND APPLICATION

I. Executive Summary

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Tobacco use is the leading cause of preventable death in the United States. The majority of daily smokers begin smoking before 18 years of age, and more than 1700 youth (under 18) in Idaho become new daily smokers each year. According to the 2007 Idaho Healthy Youth Survey, there is an estimated 30,000 youth under the age of 18 now alive in the state who will ultimately die prematurely from smoking. While it is not common for our children and youth to witness other potentially deadly behaviors on their way to school in the morning, they do see tobacco use nearly every day and are exposed to tobacco promotion messages in advertising, media, and the culture. This exposure can make it easy for young people to conclude that tobacco is an acceptable, if not desirable, behavior. Yet smoking alone kills more people nationwide than AIDS, car crashes, illegal drugs, murders and suicides combined.

Beyond the loss of life and impact on health, the monetary toll that tobacco takes on Idaho is staggering. The annual health care costs in the state that are directly attributable to smoking amount to \$319 million, \$83 million of which is covered by the state Medicaid program. The state and federal tax burden on Idaho residents due to smoking-caused government expenditures is \$549 per household. Smoking-caused loss of productivity in Idaho is \$332 million annually.

It is important to note that a true reduction of the harmful effects of tobacco use on a community is most successful with the implementation of a comprehensive tobacco prevention and control plan. The Centers for Disease Control's recommendation for fully funding a comprehensive plan in the state of Idaho is \$16.9 million. The implementation of a comprehensive plan can be accomplished by many community agencies and public entities working together. Our expertise and role in such a plan is that of youth tobacco prevention education and youth engagement.

The purpose of our proposal is to reduce the number of youth who initiate tobacco use and to change their perceptions and attitudes regarding tobacco, thereby reducing tobacco use at all ages. Our grant application will seek to build upon over five years of success in implementing Teens Against Tobacco Use (TATU) and continue to strengthen our youth tobacco prevention education program in Idaho. The Centers for Disease Control and the American Legacy

Foundation indicate that multiple strategies are the best approach for effective school-based programs designed to prevent youth from smoking. The Centers for Disease Control recommends the following activities to prevent initiation of tobacco use among young people:

- 1. Community Mobilization
- 2. Counter Marketing
- 3. School Based Prevention
- 4. Policy and Regulatory Activity

By implementing a Youth Engagement Program as an enhancement to the current youth tobacco prevention education model, our goal is to increase the effectiveness of developing anti-tobacco attitudes, reducing the number of youth who use tobacco and change social norms regarding tobacco use in the communities where programs have been initiated.

Tobacco use among some groups, such as people with less income or education, or members of racial and ethnic minorities, is significantly higher than for the general population. Often, these groups also have less access to healthcare and other resources that would help them treat their illnesses. The result is a higher rate of death and disease from tobacco use. The 2007 Idaho Healthy Youth Survey showed 63% of Hispanic students have tried smoking at least once (compared to 46% of white students).

Our proposal will include efforts to identify and increase outreach to disparate populations such as: Latino; Native American; rural and frontier communities; as well as to introduce an initiative to increase youth engagement.

The youth tobacco prevention education model we propose is a peer-led teacher model where a tobacco-free teen helps educate younger children so they will make the healthy choice to stay tobacco-free and be an advocate for tobacco control in their family and community.

The period of this funding request is for the twelve months beginning July 1, 2009, through June 30, 2010. Our goal for youth tobacco prevention education is to train 600 teen teachers and reach 12,000 youths, while increasing our outreach to underserved communities and segments of the population as referred to above. In addition, we will initiate a pilot Youth Engagement Program.

The total project budget cost is \$243,200.00. We are requesting funding support to sustain and strengthen this effort in 2009-10 for \$183,300.00 from the Millennium Fund.

II. Proposal

A. Organizational Background

As one of the nation's oldest voluntary health organizations, the American Lung Association of the Northwest (ALA NW) has been working for more than 100 years to assure lung health for the people of Idaho, Alaska and Washington.

In January of 2007, the American Lung Association of Idaho and the American Lung Association of Washington completed a merger with the American Lung Association of Alaska to create the entity of the American Lung Association of the Northwest (ALA NW). This merger has provided increased support, services and shared program expertise while decreasing operating costs. In addition, the ALA NW is able to increase corporate and major gifts capacity through regional fundraising efforts to support our mission.

In Idaho, the ALA NW offers programs and services in the current year that include: Teens Against Tobacco Use; a smoking cessation program designed specifically for teens (Not On Tobacco-N.O.T.); a school-based program designed to help children better manage their asthma (Open Airways in Schools); Camp Super Breathers, a residential summer camp for children and teens with asthma and two individual day camps; an educational support group for individuals and their loved ones living with COPD (Better Breathers Club); and participation in the High Desert Pulmonary Conference.

Board members, staff and volunteers for the ALA NW assure lung health for the residents of Idaho by: providing education on asthma management; providing youth tobacco prevention education; working for cleaner air in cooperation with State, Federal and private partners; providing support groups for people with lung disease; providing a variety of lung health education materials; attending health fair events across the State; and raising money for lung disease research.

Tony Park is Idaho's representative on the ALA NW Board of Directors. The board meets three times per year regarding governance of the Organization.

The staff members of the American Lung Association of the Northwest who have a role in overseeing and implementing the tobacco prevention model are:

- Kristin Matthews Vice President, Marketing and Community Relations
- Leanne Noren Vice President, Mission Programs
- Cindy Thompson Senior Program Director
- Jan Mandroian Flynn Program Specialist
- Kera Goold Program Coordinator
- Moriah Nelson Community Relations Specialist

For fiscal year 2009, ALA NW will raise approximately \$6 million dollars through the above mentioned sources and spend approximately \$7 million. In Idaho, approximately \$362,000 of the overall ALA NW budget is being spent in the current year to provide programs and services. The current funding from the Millennium Fund is vital and supports implementation of the TATU and N.O.T. programs.

B. Purpose of Request: Goals and Outcomes

A primary strategy in assuring lung health is to help youths understand the impacts of tobacco use on lung health. ALA NW accomplishes this goal by focusing on youth tobacco prevention education.

Prevention as the Purpose:

Almost 90% of adult smokers began at or before age 18. Research suggests that peer education prevention programs are one of the most effective strategies available to reduce youth smoking prevalence. Given that the onset of smoking is believed to be a complex process mediated by several interacting forces including both interpersonal and intrapersonal factors, prevention programs must attempt to address these complex issues. It is for this reason that social influence programs using peer education models have been developed. We know that tobacco prevention education is effective when implemented using this model. In our program, middle and senior high school students develop their own creative, knowledge-based presentations to help educate younger students about the dangers of tobacco use. This gives the elementary students the important information they need to help them begin making the decision to avoid tobacco use while developing leadership and presentation skills among the teen teachers and supporting their decision to remain tobacco-free.

Short-Term Objectives

- Reduce the number of teens who smoke in Idaho. [Approximately 17,700 (20%) of Idaho teens smoke cigarettes.]
- Increase the number of Idaho youths who choose not to smoke based on informed decision-making. [Currently 1,700 Idaho children under 18 start smoking every year.]
- Form relationships/partnerships with disparate populations

Long-Term Objectives

- Reduce the number of individuals who have to live with chronic lung disease in Idaho. [More than 155,000 Idahoans are now living with chronic lung disease.]
- Reduce the number of individuals who die from smoking-related deaths each year in Idaho. [Close to 1,500 people die in Idaho each year from smoking.]
- Effect social and behavioral change by changing the way tobacco use is perceived and the degree to which it is considered acceptable.
- Empower all potential consumers of tobacco products to withstand tobacco-industry sponsored media cues to initiate tobacco use.

Youth Engagement as the Purpose:

Youths are exposed to tobacco-positive messages from a variety of mediums, including point-of-purchase advertising in retail stores, in magazines, at the movies and by smokers they see around them, including family members in the home. Evidence shows that anti-tobacco campaigns, when combined with other interventions, are effective in reducing tobacco use by adolescents.

Research also shows teenagers are three times more sensitive to cigarette advertising than adults, and young people who identify with these images are more likely than those youth who don't identify with the images. In addition, the tobacco industry undermines the ability of parents to prevent adolescents from starting to smoke by promoting smoking.

Many of the tobacco industry's advertising expenditures are in retail stores. Retail stores are saturated with pro-tobacco signage, branded objects, and tobacco displays. Signage visible outside the stores exposes entire communities to tobacco marketing. The result is that many U.S. children grow up surrounded by pro-tobacco messages.

The tobacco industry also spends considerable resources to sponsor or support public events, the arts, and other worthy causes. In Idaho, US Tobacco is one of the largest sponsors of rodeo and bull riding events.

The ALA NW's youth tobacco prevention education program encourages adult facilitators to empower and mobilize local youth, prevent initiation of tobacco and create advocates for tobacco control through its program. To enhance the skills of these well-trained teens, we are proposing to pilot a Youth Engagement Program as part of our overall educational strategy to reinforce the knowledge teens are teaching so they may become advocates for school and community-based programs. Our proposed pilot program will be designed to raise community awareness about big tobacco marketing activities aimed at youth, build youth leadership and reinforce the decision to stay tobacco free.

Program Design

The proposed pilot program will consist of four key elements:

- 1. A grant program that will provide funding to seven (7) youth groups in each of the health district areas to initiate an anti-tobacco community awareness program. A volunteer grants committee will be formed comprised of program staff, youth and adult facilitators. Grant materials will be created and disseminated to youth groups throughout the state. Any organized youth group will be eligible to apply, including current youth tobacco prevention groups.
- 2. The grants committee will review applications and select one youth group in each health district office and award a grant of \$1,000 to fund a community awareness program.
- 3. An educational forum for the grant recipients will be held to provide youth and their adult facilitators with the resources needed to conduct successful community awareness

programs. We will collaborate with the Department of Health and Welfare and the Magic Valley Tobacco Free Coalition (MVTFC), an anti-tobacco youth advocacy group in Twin Falls, Idaho, to develop program content for the educational forum. We also plan to utilize members of MVTFC as speakers and peer mentors.

- 4. Technical assistance and resources will be provided by program administration staff to assist the youth groups during the grant period.
- 5. An evaluation piece will be created to assess the effectiveness of the program. Each grant recipient will be required to provide a final report to the grants committee detailing how the funds were spent and the outcomes achieved through their program.

B. Organizational Capacity

The devastating effects of tobacco on lung health are well established and widely known. The most powerful antidote to tobacco is to prevent its use in the first place. Since most regular smokers begin the habit before the age of 18, the proper target for prevention efforts is youth ages 18 and under.

One strategy for the ALA NW to prevent lung disease is to educate youths about the harmful effects of using tobacco and to learn appropriate refusal techniques. Our youth tobacco prevention education program teaches those skills. The peer education model is well known to be effective for delivering a variety of prevention messages.

For more than five years, we have successfully implemented the youth tobacco prevention education program Teens Against Tobacco Use (TATU) in Idaho. While the TATU program has been successful, there are many enhancements that need to be made in order to keep our youth tobacco prevention education program current and able to be delivered appropriately in various communities. The ALA NW continues to enhance and expand its youth tobacco prevention education program to reach youth in disparate populations. Using the TATU model, the ALA NW created Latino and Native American versions of the program and is successfully reaching these populations in Washington State. In Idaho this year, we have begun working with the Latino and Native America populations to address the disproportionately high percentage of youths by implementing TATU in these communities. We plan to continue in this direction while meeting other unique needs of communities in Idaho, including rural and frontier regions. We are experts at bringing together members from the communities within which we work to incorporate their recommendations and suggestions in order to reach out to those in greatest need.

During the current year, the ALA NW partnership with the Department of Health is instrumental in delivering the TATU program throughout various regions of the state. Five of the seven Health District Offices contract with the Department of Health to implement TATU as part of their tobacco prevention activities, while the remaining two offices contract with the state to implement other tobacco prevention programs. Also in the current year, and in the previous year, we have initiated partnerships with non-traditional (that is, non-school) venues to increase our program's penetration in under-served communities. In 2007-2008, we worked with Meridian Boys and Girls Club to deliver the program to teens participating at the club. We are currently offering the program to teens and youth at both the Meridian and Moseley Center Boys and Girls

Club locations, and propose facilitating presentations by Club teens to younger youth who are served by the Clubs. We are also offering the program to the Treasure Valley YMCA system, beginning with the Leadership junior-high teens at the Downtown Y location this fall. In addition, we have contracted with the Centro de Comunidad y Justicia to implement our program in both school and community settings within the Latino community.

As ALA NW, Washington has one of the most effective youth tobacco prevention programs in the nation, whereby last year approximately 2000 teens delivered anti-tobacco messages to over 41,000 youths. Idaho benefits greatly from the expertise and knowledge and as part of ALA NW, has access to the resources needed to improve our state's program.

The ALA NW is a member of the Coalition for a Healthy Idaho and the Tobacco Free Idaho Alliance, both of which address tobacco issues across the state. In addition, we are a member of the Asthma Coalition of Idaho, which has as part of its focus the effects of second hand smoke on children with asthma and on adults. In 2009 – 2010 we plan to continue to partner with the Idaho Academy of Family Physicians prevention program TAR WARS, local school districts, and the Centro de Comunidad y Justicia. Our ongoing relationships with Public School's Safe and Drug Free Coordinators, the State Departments of Health and Environmental Quality, as well as our working relationships with health care networks and provider groups, further link us to the community committed to tobacco-free living in Idaho.

1. Qualifications and responsibilities of the staff and volunteers who will be working with the target population

All staff and volunteers involved in the youth tobacco prevention education program must be non-tobacco users or have committed to the intention to quit. Additionally, experience in working with youth in educational or community settings is necessary. The success of our youth tobacco prevention education program relies on training facilitators throughout the state who in turn help us train teens to prepare and deliver presentations. An ALA NW staff member conducts facilitator trainings for adults who have expressed interest in the program. Once trained, the adult facilitators recruit high school and middle school teens to participate in the program. The adult facilitator trains teens to make effective presentations to peers and elementary school-aged children.

2. The target population's involvement in your organization.

There are many individuals involved in implementing this program. The target populations of teachers, school nurses, counselors, health district employees, community members, teens and other volunteers are trained by the ALA NW to facilitate the program in their schools and communities. All partners involved are considered volunteers for the ALA NW.

D. Process

The tasks and timetable for key staff and organizations involved in this effort are outlined in the following chart:

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Order audio-visual & trainer materials and all necessary supplies.		✓										
Track adult facilitators in our database.		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Develop organizational partners.		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Conduct adult trainings.		✓			✓			✓			✓	
Select target schools and student groups utilizing trained adult facilitators.		✓										
Select sites and dates for teen training workshops.		✓			✓			✓			✓	
Recruit teen trainers.		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Conduct teen training.			✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Teens prepare and practice presentations.			✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Presentations made to elementary school classes.			✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Monitor and evaluate teen presentations.			✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Compile evaluation data and reports.			✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Recruit trainers from prior school year to continue service with program.		✓	✓	✓						~	✓	✓
Recruit teen trainers.		✓	✓	✓						~	✓	✓
Develop pilot Community Engagement Program	✓	✓										
Advertise and solicit program to ID youth groups		✓	✓									
Select recipients				✓								
Plan and hold educational summit		✓	✓	✓	✓							
Provide support to grant recipients			✓	√	✓	✓	✓	✓	✓	✓	✓	✓
Evaluate pilot Community Engagement Program										√	✓	✓

Existing community resources we will use include: schools; community centers; clubs; churches; the YMCA system; District Health Offices; Safe and Drug-Free Schools; the Department of Health and Welfare; Idaho Academy of Family Physicians (TAR WARS); youth organizations (Girl & Boy Scouts, 4-H, etc).

The activities that will occur on a day-to-day basis are: planning; promotion; technical assistance; management and oversight; and in a number of situations, direct hands-on facilitation of the program.

Our target populations are teens and their younger peers. Teens will benefit from training that provides them with knowledge about tobacco and a constellation of skills including: refusal skills, media analysis skills, and presentation skills. Moreover they will be empowered to have a direct effect on the awareness and health of their younger peers, and on their families and communities. Youth who receive teen presentations will benefit from a tobacco prevention message that is fun, engaging, and delivered by role models that they look up to and wish to emulate. Both populations benefit from the support the program provides them to make the decision to be tobacco-free. These populations' involvement in the program's development and execution are as follows:

Teens

The delivery system for the youth tobacco prevention education program focuses on preparation of high school or middle school students to plan and present a mini-series of anti-tobacco lessons to younger children. This process reinforces the decision of teen teachers to be tobacco free and to provide knowledge-based advocacy for their peers to refrain from tobacco use or to become tobacco free.

Elementary School Children

Our program employs a peer-teaching model that allows each group of trained teens to develop presentations consisting of a multitude of teaching tools such as short quizzes, skits, role playing, posters, videos, visual props, group discussion, hands-on activities and displays. Using these tools, the teen teachers are able to keep the attention of the children and help guide them away from a potentially lethal addiction to tobacco.

E. Evaluation Plan

In 2008-2009, we will have undertaken an evidence-based evaluation of the TATU program. The evaluation focuses on two components of TATU: 1) the effectiveness of TATU for reducing susceptibility to tobacco use uptake and increased anti-tobacco attitudes among teens involved in the program and 2) the effectiveness of TATU for increasing anti-tobacco attitudes among younger youth receiving TATU presentations. It is our intention that these results will be published, thereby making them widely available.

Going forward with our youth tobacco prevention education program, we wish to answer questions we have not yet addressed. 1) Does the effect of the teen presentations on younger youth have an impact on their behavior over the years that lead them into high school? 2) Does it impact their decision to use or not use tobacco products in the years leading up to high school?

Establishing a study design that can be utilized over several years following a cohort of children starting in grade 4 until they reach grade 10 will provide measurable outcomes on the long term effects of our program. We believe a study that follows children for a number of years will be extremely valuable in determining the effectiveness of youth tobacco prevention education efforts. In FY 2010 we propose contracting with a consultant to design a statistically sound and feasible study that would be used in future years. Currently we are exploring this concept with the consultant from Boise State University who is conducting this year's TATU evaluation. We will use this information to examine and establish the long-term effectiveness of this program on behaviors and attitudes of the youth who receive teen presentations.

F. Sustainability

In addition to Millennium resources, we have a significant value attributed to in kind volunteers and other financial resources through corporate and private donations, foundations and special events. Our past five years demonstrates our ability to complete our deliverables.

Perhaps the most significant guarantee of sustainability is the fact that preventing youth from using tobacco is gaining momentum nationwide as many states consider going smoke-free and as smoking becomes less popular as a social activity. Programs such as ours need funding. As in Idaho, most other states fund such programs through grants that come from the state Tobacco Settlement dollars. Since our youth tobacco prevention education program is a free service to the schools, and to the elementary and teen students who participate, we do not anticipate that this project will become self-supporting. The intent of the Settlement dollars is to use these funds to help future generations remain tobacco free as well as assist those who are current tobacco users Continued funding from Tobacco Settlement monies will be necessary to sustain the program in Idaho.

III. Budget

Project Budget

Other Funding Sources

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	Millennium Fund	In-kind volunteers	ALA NW	TOTAL
Personnel Costs				
Salaries	46,700	28,800	12,300	87,800
Benefits	14,300		4,100	18,400
Total Personnel Costs	61,000	28,8000	16,400	106,200
Operating Expenditures				
Program Evaluation - Contractor				
(1)	17,000			17,000
Community Contractor (3)	60,000			60,000
Speaker Fees	2,500			2,500
Supplies	4,500		2,500	7,000
Travel	11,400		2,000	13,400
Occupancy	8,700		6,500	15,200
Mini-grants	11,000			11,000
Postage	400			400
Printing	1,100		900	2,000
Staff Development	2,100		2,000	4,100
Telephone	800		800	1,600
Media and Advertising	500			500
Youth Conference	2,300			2,300
Total Operating Expenditures	122,300	0	14,700	137,000
Capital Outlay				
1.				0
2.				0
3.				0
4.				0
5.				0
6.				0
7.				0
Total Capital Outlay	0	0	0	0
Trustee Benefit Payments				
Total T/B Payments				0
TOTAL BUDGET	183,300	28,800	31,100	243,200
% TOTAL	75.4%	11.8%	12.8%	100.0%